



Department of Veterans Affairs

AUTHORITY TO RELEASE AND SHIP EFFECTS AND FUNDS

NAME <i>(Check distribution)</i> <input type="checkbox"/> CHIEF, FINANCE (FISCAL) DIVISION <input type="checkbox"/> PATIENTS CLOTHING AND VALUABLES CUSTODIAN <input type="checkbox"/> CHIEF, SUPPLY DIVISION		NAME OF BENEFICIARY	
DATE OF BENEFICIARY'S DEATH	DATE SHIPPED <i>(Divided)</i>	CLAIM NO. XC -	SOCIAL SECURITY NO.
RELEASE AND SHIP (DELIVER) EFFECTS OR FUNDS TO			
NAME OF RECIPIENT <i>(Specify relationship and whether designee or alternate)</i>		ADDRESS	
<p>In accordance with Regulations, you are authorized to release and ship to the recipient indicated, the personal effects and/or the unencumbered balance of funds on deposit in PERSONAL FUNDS OF PATIENTS to the credit of the above deceased beneficiary. (Shipment of personal effects at Government expense shall not exceed \$25.) Transfer of these effects and/or funds covers possession only, and such transfer does not in itself affect title thereto. If contested, payee will be accountable to the owner of said effects and/or funds under the applicable laws.</p>			
REMARKS			
DATE	SIGNATURE OF DIRECTOR <i>(or designee)</i>		